

## UNITED STATES DISTRICT COURT

for the

District of Rhode Island

\_\_\_\_ Division

DiLeo, Andrew Joseph

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-v-

Simmons University  
UHS-Fuller dba Arbour Fuller Hospital

Defendant(s)

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

Case No. \_\_\_\_\_

(to be filled in by the Clerk's Office)

Jury Trial: (check one) ☒ Yes ☐ No

## COMPLAINT FOR A CIVIL CASE

## I. The Parties to This Complaint

## A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	Andrew Joseph DiLeo
Street Address	144 Church Street
City and County	Manville, Providence County
State and Zip Code	Rhode Island 02838
Telephone Number	401-477-2128
E-mail Address	andrew.j.dileo@gmail.com

## B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

## Defendant No. 1

Name Simmons University

Job or Title *(if known)*

Street Address 300 The Fenway

City and County Boston, Suffolk County

State and Zip Code Massachusetts 02115

Telephone Number 617-521-2000

E-mail Address *(if known)*

## Defendant No. 2

Name UHS-Fuller dba Arbour Fuller Hospital

Job or Title *(if known)*

Street Address 200 May Street

City and County Attleboro, Bristol County

State and Zip Code Massachusetts 02703

Telephone Number 508-761-8500

E-mail Address *(if known)*

## Defendant No. 3

Name

Job or Title *(if known)*

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address *(if known)*

## Defendant No. 4

Name

Job or Title *(if known)*

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address *(if known)*

**II. Basis for Jurisdiction**

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation and the amount at stake is more than \$75,000 is a diversity of citizenship case. In a diversity of citizenship case, no defendant may be a citizen of the same State as any plaintiff.

What is the basis for federal court jurisdiction? *(check all that apply)*

☒ Federal question ☐ Diversity of citizenship

Fill out the paragraphs in this section that apply to this case.

**A. If the Basis for Jurisdiction Is a Federal Question**

List the specific federal statutes, federal treaties, and/or provisions of the United States Constitution that are at issue in this case.

Title II, Civil Rights Act of 1964  
 Title VII, Civil Rights Act of 1964  
 Title IX, Civil Rights Act of 1964  
 Whistleblower Protections  
 First and fourteenth Amendments the United States Constitution

**B. If the Basis for Jurisdiction Is Diversity of Citizenship****1. The Plaintiff(s)****a. If the plaintiff is an individual**

The plaintiff, *(name)* \_\_\_\_\_, is a citizen of the  
 State of *(name)* \_\_\_\_\_.

**b. If the plaintiff is a corporation**

The plaintiff, *(name)* \_\_\_\_\_, is incorporated  
 under the laws of the State of *(name)* \_\_\_\_\_,  
 and has its principal place of business in the State of *(name)* \_\_\_\_\_.

*(If more than one plaintiff is named in the complaint, attach an additional page providing the same information for each additional plaintiff.)*

**2. The Defendant(s)****a. If the defendant is an individual**

The defendant, *(name)* \_\_\_\_\_, is a citizen of  
 the State of *(name)* \_\_\_\_\_. Or is a citizen of  
*(foreign nation)* \_\_\_\_\_.

## b. If the defendant is a corporation

The defendant, *(name)* \_\_\_\_\_, is incorporated under the laws of the State of *(name)* \_\_\_\_\_, and has its principal place of business in the State of *(name)* \_\_\_\_\_.

Or is incorporated under the laws of *(foreign nation)* \_\_\_\_\_, and has its principal place of business in *(name)* \_\_\_\_\_.

*(If more than one defendant is named in the complaint, attach an additional page providing the same information for each additional defendant.)*

## 3. The Amount in Controversy

The amount in controversy—the amount the plaintiff claims the defendant owes or the amount at stake—is more than \$75,000, not counting interest and costs of court, because *(explain)*:

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**III. Statement of Claim**

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

See Attached Complaint Page

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**IV. Relief**

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages.

Remediation sought: Both Simmons University and Arbour Fuller Hospitals will remove any derogatory statements, documents, grades or other adverse actions from all documentation in any record regarding the Plaintiff. Additionally, the Plaintiff will be admitted to the degree of Master of Social Work from Simmons University based on the work he has done in the community in this field since 2001, most notable during his tenure during and following his admission to Simmons University.

Remuneration sought: From each Defendant in this case, a financial sum of \$2,200,000 (total of \$4,400,00) to cover legal fees and pursuit of this matter, lost wages, pain and suffering, reputational damage, lost promotional and hiring wage earnings, discriminatory acts and educational costs associated with pursuing the Master of Social Work degree from this institution.

**V. Certification and Closing**

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

**A. For Parties Without an Attorney**

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: \_\_\_\_\_

10/4/23

Signature of Plaintiff

Printed Name of Plaintiff

Andrew Joseph DiLeo, Attorney Pro Se

**B. For Attorneys**

Date of signing: \_\_\_\_\_

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Street Address

State and Zip Code

Telephone Number

E-mail Address

I am penning this complaint to bring attention to the egregious and discriminatory actions perpetrated against me by Simmons University and Arbour Fuller Hospital, leading to my unjust dismissal from the Master of Social Work program. The crux of this issue revolves around a retaliatory “failure” of an internship at Arbour Fuller Hospital after I exposed unethical practices within the institution.

I, an openly gay male over the age of 40, found myself serving as the sole male clinician and a full-time In-Home Therapist at Arbour Fuller Hospital, embedded within a team predominantly comprised of younger females with considerably less experience in the field of social work. My professional journey in this field initiated in 2001, marking a substantial tenure compared to my contemporaries.

During my tenure, I encountered a professional environment that expected me to adhere to an 80% productivity and 20% administrative work ratio. This expectation starkly contrasted the normative balance of 50% productivity and 50% administrative and educational time with supervisors, typically accorded to interns. Furthermore, I experienced pressure to modify work week timesheets and adjust billable hours to align with the company standards for full-time employees – a blatant violation of ethical and legal standards.

Responding with integrity and ethical steadfastness, I reported these irregularities to my field liaison at Simmons University, with an implicit understanding of confidentiality and the anticipation of an appropriate resolution. Contrary to this expectation, the field liaison breached confidentiality, informing Arbour Fuller Hospital of my complaint.

Instead of rectifying the unethical practices brought to light, Arbour Fuller Hospital chose a path of discriminatory and retaliatory actions against me, predicated on my sexual orientation and whistleblowing. This culminated in my termination, ironically on the grounds of “insurance fraud” – the very malpractice I had reported to the Commonwealth Commissioner of Insurance.

Both Arbour Fuller Hospital and Simmons University’s actions have engendered severe consequences, obstructing my academic progress and tarnishing my professional reputation. These actions represent not only a violation of non-discrimination and anti-retaliation principles but also a transgression of my rights under the U.S. Constitution, Federal Laws, and the Commonwealth of Massachusetts Laws. Specifically, this conduct infringes upon the Equal Protection Clause of the Fourteenth Amendment, Title II of the Civil Rights Act, and Massachusetts General Laws Chapter 151B.

Having undergone investigations by both entities, which culminated in my removal instead of a resolution, I seek the intervention of this honorable court to conduct a thorough and impartial examination of this matter and to redress my grievances. Appropriate measures and remedies must be explored to rectify this injustice and prevent its recurrence. The values of education and ethical practice should be upheld and protected, not punished and undermined.

I respectfully submit this complaint and anticipate a thorough judicial review and an equitable resolution to address and rectify the substantial harm incurred.